Combined Declaration F	or Patent A	Application ar	nd Power of Attorne	у			ATTORNEY DOCKET 81000DAN					
As below named inventor,	I hereby declare	e that:				_1						
My residence, post office address and citizenship are as stated below next to my name,												
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:												
PROCESS FOR MAKING DIGITAL IMAGES AVAILABLE TO A USER ON A SERVER												
The specification of which (check only one item below):												
X is attached hereto.												
was filed as United States Application Serial No. on and												
was amended on (if applicable).												
was filed as PCT international application Number on and was amended under PCT Article 19 on (if applicable).												
I hereby state that I have reviewed a	and understand	the contents of the	above-identified specification,	including the clai	ims, as a	mended by	any ame	ndment				
referred to above. I acknowledge the duty to disclose to	the U.S. Patent	t & Trademark Offic	ce all information known to me	e to be material to	patenta	bility as de	fined in T	itle 37,				
I acknowledge the duty to disclose to the U.S. Patent & Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.												
I hereby claim foreign priority benefit				· · · •								
international application(s) designating applications(s) for patent or inventor	=	· ·					•	_				
America filed by me on the same subj	ject matter havin	ng a filing date before	that of the application(s) of w	hich priority is cla	•							
PRIOR FOREIGN/PCT APPLICA	TION(S) AND	ANY PRIORITY C	CLAIMS UNDER 35 U.S.C.	119:								
COUNTRY (# PCT, indicate PCT)		PPLICATION NUMBER	DATE OF FILING (day month year)		PR	IORITY CLAIMED U	NOER 35 USC §1					
France	 	0005451	26 April 20	000	X	YES		NO				
· <u>E</u>						YES		NO .				
	<u> </u>					YES		NO				
I hereby claim the benefit under Title	35. United State	es Code, 119 §(e) of	fany United States provisional	application(s) list	ed below	r:						
PRIOR PROVISIONAL APPLICA												
PROVISIONAL APPLI				FILING DATE		·						
, <u> </u>												
I hereby claim the benefit under Title 35, United States Code, §120 of any prior United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior applications(s) in the manner provided by the first paragraph of Title 35, §112, I acknowledge the duty to disclose to the U.S. Patent & Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations §1.56, which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:												
PRIOR US APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S FOR BENEFIT UNDER 35USC§120:												
U.S. APPLICATIONS					STATUS (Check one)							
U.S. APPLICATION NUMBER		U.S FILING DATE		PATENTED		PENDING	ABAN	NDONED				
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PCT APPLICATIONS DESIGNATING THE U.S												
PCT APPLICATION NO PCT FIL		NG DATE	U S SERIAL NUMBERS ASSIGNED (if any)									
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Co	mbined Dec	laration For Patent Application	ATTORNEY DOCKET								
POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorney(s) and/or											
agent(s) associated with Eastman Kodak Company Customer No. 01333 to prosecute											
this application and transact all business in the Patent and Trademark Office connected											
therewith.											
Send Correspondence to: Direct Telephone Calls to: (name and telephone number)											
Patent Legal Sta						(name and telephone number)					
				Company		David A. Novais					
		343 Star				(716) 588-2727					
Rochester, NY 1				14650-2201		FAX: (716) 477-1148					
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME		SECOND GIVEN NAME						
-		Vau crry		Jean-Marie STATE OR FOREIGN COUNTRY		COUNTRY OF CITIZENSHIP					
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	FULL NAME OF	Kodak Industrie		Zone Industrielle FIRST GIVEN NAME		SECOND GIVEN NAME					
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A CO	CITIZENSHIP	BUSINESS ADDRESS		CITY		STATE & ZIP CODE (COUNTRY)					
1112	ADDRESS					<u> </u>					
-2	FULL NAME OF INVENTOR	FAMILY NAME		FIRST GIVEN NAME		SECOND GIVEN NAME					
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5=	BUSINESS ADDRESS	BUSINESS ADDRESS		CITY		STATE & ZIP CODE (COUNTRY)					
2	FULL NAME OF INVENTOR	FAMILY NAME		FIRST GIVEN NAME		SECOND GIVEN NAME					
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6	BUSINESS ADDRESS	BUSINESS ADDRESS		CITY		STATE & ZIP CODE (COUNTRY)					
┝─┚		that all statements made herein of r	ny own knor	l	s made on	information and belief are believed to be true;					
and	l further that t	hese statements were made with the	knowledge	that willful false statements and the	like so ma	de are punishable by fine or imprisonment, or					
	h, under section in the section in t	on 1001 of Title 18 of the United Sta	ates Code, an	d that such willful false statements m	ay jeopard	ize the validity of the application or any patent					
SIG	NATURE OF IN	VENTOR 201	SIGNATURE	OF INVENTOR 202	SIGN	IATURE OF INVENTOR 203					
DATE DATE		DATE	DAT		(E						
Jean-Horie Van. DATE Tel- 19th 2001			DAT								
SIGNATURE OF INVENTOR 204 SIGN		SIGNATURE	ATURE OF INVENTOR 205 SIG		IATURE OF INVENTOR 206						
S.G.M. O. M. ENTON 204		2.2.3.1.011	SIGNATURE OF INTERNATION 200								
<u></u>			DATE								
DATE		DATE		DAT	<u> </u>						